ADMINISTRATION OF MEDICATION SELF-STUDY TRAINING PROGRAM

The Nurse Practice Act has been revised to allow day care providers to administer medication other than by injection, to children in their care. The law now allows day care providers to give both prescription and non-prescription medication, provided that parents have given written permission and that the day care provider administering the medication has successfully completed this training.

Prior to administering any medication to children in your care you must study this medication packet and be tested on your knowledge of its content. After passing an administration with medication test you will be issued a certificate stating you are able to administer medication.

Upon completion of this training course, you, the day care provider, should be able to:

- 1. Identify the legal and ethical responsibilities associated with administering medication.
- 2. Know the process for obtaining parental permission to administer medication.
- 3. Identify the five rights of medication.
- 4. Identify the differences between use, misuse, and the abuse of medications.
- 5. Describe policies concerning the usage of prescription or non-prescription medications.
- 6. List the components of a properly-labeled prescription.
- 7. List the sources available for obtaining information regarding special considerations for the usage and storage of specific medications.
- 8. Describe how information can be obtained from some acceptable written source, e.g. PDR (Physicians Desk Reference).
- 9. Know when not to administer medication.
- 10. Discuss system of measure that may be utilized in medication preparation.
- 11. Recognition of the basic abbreviations, symbols, and terminology associated with medication usage.
- 12. Define medication errors, identify prevention techniques, and list the procedures for reporting errors.
- 13. Recognize possible effects of major drug groups
- 14. Describe action(s) to be taken by the provider when adverse effects are recognized.
- 15. Identify the policies relating to the proper storage of medications.
- 16. Describe the procedures for the disposal of medication.
- 17. The elements of a medication log.

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I. <u>LEGAL AND ETHICAL RESPONSIBILITY</u>

When administering medications, you are legally responsible for making sure that you comply with the requirements that medications be in original containers and properly labeled.

The privilege of being able to perform this function is granted to those who successfully pass an approved medication training program. As a participant in the provision of medications, you are expected to carry out your role in a manner which protects the recipient of service from harm.

A basic understanding of the medications which you are administering is important to the recipient's overall well-being. Therefore, you are responsible for obtaining needed information on medications so that you can carry out your role in an appropriate way.

It is expected both from a legal and ethical standpoint that you will not knowingly participate in practices which are outside of your legally permissible role or which may endanger the well-being of the recipient.

II. ADMINISTRATION-OF MEDICATION BY DAY CARE PROVIDERS

In addition to having completed medication training, you, the day care provider by law, must meet two other conditions prior to administering medication. The day care provider must have prior written permission from the parent for each specific medication the child is to be given. The written permission must specify the medication, proper dosage, the times the medication is to be given, and must be signed and dated by the parent. Additionally, the medication to be given must be in its original container, properly labeled, and the label must include instructions for the administration of the medication.

III. THE FIVE RIGHTS OF MEDICATION

You must be certain you are administering the <u>right drug</u> to the <u>right child</u> in the <u>right amount</u> at the <u>right time</u> using the <u>right route</u>

Each time a drug is taken, you must systematically and conscientiously check your procedure against these five rights.

Right Client:

In order to make sure that you have the right child, you have to know the individual. If you are not certain beyond a shadow of a doubt that you are giving the right drug to the right child, STOP, and seek assistance from another staff member who is more familiar with the child.

Right Drug:

To ensure that you are administering the right drug, you must follow the following procedure:

1. Compare the medication log with the pharmacy label. 2. Double check them to make sure they agree.

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Right Dosage:

Be sure to check the right dosage by comparing the medication log (if used) and the pharmacy label to make sure they agree. <u>Carefully</u> measure or count the correct dosage <u>AND</u> compare this amount with the pharmacy label.

Right Time:

When a physician prescribes a drug, he/she will specify how often the drug is to be taken.

Example: once a day

twice a day - (usually 12 hours apart) three times a day - (around mealtimes) four times a day - (4 hours apart)

Right Route:

Medications must be administered properly in order for them to have the proper effect on the body. Following are routes of administration: Oral - by mouth

Topical - placed directly on the skin Eye drops - placed in the eye Ear drops - dropped into the ear canal Nose drops/spray - sprayed into the nostril

Day care provider may not give any medication injections.

You may give the drug only when you are sure you have the:

right child right drug right dosage right time right route.

A. THE USE, MISUSE, AND ABUSE OF MEDICATIONS

Use of medications is appropriate when:

- 1. The doctor has prescribed the medication for the person taking it.
- 2. The person takes the correct amount prescribed by the doctor or as directed by the label in an over-the-counter medication.
- 3. The person takes the medication at the proper times for the number of days indicated.

Misuse of medications occurs when:

1. The person takes medication prescribed for someone else.

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- 2. The person changes the amount of the medication taken thinking that "if this amount is good, more must be better."
- 3. The person does not take the medication at the correct times or length of time required.
- 4. The person keeps unused medications beyond the expiration date for "future use.

Abuse of medications occur when:

- 1. A person gets prescriptions from several different doctors for the same false symptoms.
- 2. A person takes drugs to such a level that he is unable to function properly and his behavior is strange.

IV. PRESCRIPTION AND NON-PRESCRIPTION MEDICATION

Prescription Medication:

This group includes all drugs which must be ordered by a medical doctor and be provider by the doctor or a pharmacist.

A prescription drug is provided for a <u>single</u> person who has a <u>Specific condition</u> which the doctor is treating by using the prescription drug.

The only way these drugs can be obtained is by prescription from a doctor.

Nonprescription Medication:

Nonprescription medications are also called "over-the-counter" or OTC drugs.

Over-the-counter drugs can be purchased without a prescription.

Common over-the-counter drugs include pain relievers like plain aspirin or Tylenol and certain cold remedies like Contac and Robitussin.

Even over-the-counter medications are meant to be used for specific reasons. The symptoms which can be helped by an over-the-counter medication are listed on the label.

Guidance from a doctor is a good idea even when using over-the-counter medications, particularly when used with children under the age of two.

V. PRIOR TO GIVING A MEDICATION

Before being able to give medication, the following information must be available:

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- 1. There must be written permission from the child's parent to give the specific medicine.
- 2. The prescription medication label must be made out clearly, with proper directions, and be in the name of the child to whom you are giving the prescription.
- 3. In the case of over-the-counter drugs, the label must be clear so that directions for use, dosage, and storage are readable. When over-the-counter medications are for children under two years of age, a physician or nurse practitioner's direction as to amount and frequency should accompany the container.

A. A PROPERLY LABELED PRESCRIPTION

The prescription functions as a written order from the doctor to the pharmacist. The pharmacist will then provide the medication in a container which has a pharmacy label. The label should contain at least as much information as the doctor's prescription.

The following is an example of a proper pharmacy label:

Line 1	432-	7101	My Pharmacy	732 S. Ocean Town, DE
Line 2	Tim	Potter		4/1/92
Line 3	Ampicillin		250 mg.	#24
Line 4	Take one (1) capsule four (4) times a day.			
Line 5	Rx 2284			Dr. T. Berry
Line 6	Refills remaining: 0			
Line 7	Exp. Date: 4/1/93			
	 Line 1. Pharmacy's phone number, name, and address. Line 2. Name of the person for whom the medication is intended. Line 3. Name, strength of each capsule, and number of capsules in the container. Line 4. Directions for taking the medication. Line 5. Prescription number (given by the pharmacy) and the physician's name. Line 6. Number of times the medication may be renewed without a new prescription. Line 7. Expiration date: It is unsafe to take some medications after a certain period of time. If the medication has an expiration date, it should appear on the pharmacy label. 			

B. RESOURCES AVAILABLE FOR OBTAINING INFORMATION ABOUT SPECIFIC MEDICATIONS.

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For over-the-counter (OTC) medications, the information concerning how to use the drug and how to properly store it is printed on the package or bottle. Also, any pharmacist can provide answers to questions on use and storage.

For prescription drugs, the following resources are available concerning how to use the drug and how to properly store it:

- 1. The container itself will give directions for use including whether it should be taken with or without food. Also, if a drug must be refrigerated or has to have special handling, the pharmacist will put it on the container.
- 2. The pharmacy listed on the container can be called to ask for information concerning use and storage.
- 3. The person's physician listed on the container can be contacted for information.

Further written information about medication is available upon request from the following sources:

- 1. The pharmacy Upon request, a package insert from particular drugs can be provided. In general, the insert will describe the drug, its intended use, side effects which can occur with use, side effects which warrant immediate medical consultation, warnings about individuals who should not be using the drug, and any special handling or storage directions as appropriate.
 - The insert is available for prescription drugs. Similar information can be found on the packaging of OTC drugs.
- 2. Upon request, the Office of Narcotics and Dangerous Drugs can send you printed information on a specific drug. Their phone number is (302)739-4798.

C. WHEN NOT TO ADMINISTER MEDICATION

- If any one of the items is missing:

 your facility's medication log
 legible pharmacy label
- 2. If the child exhibits a dramatic change in attitude and/or behavior.
- 3. If you have any doubt that you have the <u>right</u> child, <u>right</u> drug, <u>right</u> dosage, <u>right</u> time, or <u>right</u> route, get assistance from another staff member before assisting the child with the drug.

If the child has difficulty in taking the medication (swallowing a large tablet, for example), check with the parents for administration techniques specific to that child's needs.

If you do not administer the medication, notify the parent and explain why you made this decision.

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VI. THE ADMINISTRATION OF A MEDICATION

A. PROPER MEASURING OF MEDICATION

When giving medication, especially liquid, it is advisable that an accurate measuring device be used. Most pharmacies will provide a free measuring cup which will hold up to a fluid ounce. This taken by the individual.

Some of the more common measurements you may want to be aware of include:

2 tbsp. = 1 fluid ounce 1 tbsp. = 1/2 fluid ounce t tsp. = 1/3 tablespoon

The prescription labels with which you will come into contact will be written in a manner that is easy to understand (example: take one teaspoon every four hours; take one capsule daily). It may contain one or more of the more commonly used medical abbreviations or symbols. Some of the more frequently utilized ones include:

bid = twice a day qid = four times a day cap = capsule oz. = ounce fl. = fluid

B. THE PROCEDURE OF ADMINISTRATION

When you, the provider, gives the child his medication, you become responsible for assuring that the five rights of medication are followed: they are: the right drug to the right child at the right time in the right dose by the right route. This means that you, as the provider, are responsible for the following for each child:

- 1. Knowing the time that each medication is to be taken.
- 2. Checking the medication label:
 - a. to insure that you have obtained the right medication at the right time.
 - b. to familiarize yourself with the manner in which the medicine is to be taken (is it a pill, a lotion to be applied to the body, ear drops, etc.)
 - c. to note any special instructions for usage (e.g., take with milk; shake well before using).
- 3. Checking the label to ascertain the correct dosage indicated.
- 4. Giving the right medication to the right child using the proper equipment. (This may include a cup, spoon, water and/or juice, dropper, etc.)
- 5. To measure and pour out the medication and to give the medication by the right route. This may be by mouth, applied to the skin, or in the eye or ear.
- 6. Returning the closed medication container to the proper storage area.

In addition to the five rights of medication, there are some additional safeguards to help minimize medication risks. These include:

<u>DO:</u> Give your full attention to the task.

Remain with the child until the medication has been taken.

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Prepare medication for only one child at a time.

DON'T Take medication from a container which has a label that cannot be read.

Take medication from another person's container.

Try to hide a medication error.

It is <u>very</u> important to check the medication label many times during the above process to insure that the five rights of medication are being adhered to.

1. The Timing of Dosages

Sometimes a medicine label will not have the time to take the medication written. The label may simply say: "take three time a day" or '.'take four times a day."

In order to ascertain the time to take a medication which is ordered in this manner, ask the parent when the last dose was taken. The following rules for spacing apply:

4 times a day = 4 hours between doses

3 times a day = at mealtime (check specific medication recommendations, i.e., is medication to be taken before, after, or with meals)

2 times a day = on waking and at bedtime

2. Medication Techniques for Infants and Toddlers

Assisting with medications in pediatric populations may be difficult and will require special techniques.

Based on the rapid growth and developmental changes in infancy and childhood, techniques utilized for helping developmental capacity of the child.

<u>Young Infant</u>: Place the measured medication in an empty nipple and allow the baby to suck it out.

Older Infant: Place the medication in a small cup. Hold the infant firmly, holding the hands so that he/she does not push the medicine out of your hand. Gently, pour the medication into the child's mouth.

NEVER: Put the medication in the bottle. There is not only no way to be certain that the child will take all the medication, but there is always the danger that the child will refuse to take desired fluids.

<u>Toddler</u> (1 - 3 years): Never <u>ask</u> the toddler if he/she wants to take his/her medication now. You may get a "no" response and if you proceed to give the medication anyway, you will lose the toddler's trust. If the child is still unable to handle a cup well, use the same process as with the older infant. If the child can handle a cup easily, pour the medication into a small cup and allow the child to drink the medication with supervision. Pills utilized for this age group are usually in chewable form. <u>Stay with the child</u> to make sure that the pill was in fact chewed.

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C. DOCUMENTATION

When you give a child medication it is important that you document the time and dosage. This is especially important if you share the responsibility of giving medication with another person in you facility if more than one child is receiving medication, or if someone other than yourself is sharing medication information with parents at the end of the day. Additionally, it is essential in terms of your liability to keep records of medication you have administered.

The best way to keep this information is on a Medication Log. A Medication Log is simply a sheet of paper that states:

- 1. All the medications to be taken during the day.
- 2. The name of the person who is administering the medication.
- 3. The time that the medication should be taken.
- 4. The amount of each drug to be taken by each child.
- 5. The name of the child who is to receive the medicine.

An example of a recommended Medication Log which includes a parental consent is located in Appendix I.

D. MEDICATION ERRORS

A medication error occurs when any one or more of the five rights of medication are violated.

A medication error has occurred if-

- 1. The child took the wrong medication.
- 2. The child took the wrong dose.
- 3. The child took the medication at the wrong time, or a medication was not taken at all.
- 4. The medication was taken by the wrong route.

If a medication error occurs, you must immediately call the child's parents.

Tell the parents on the phone:

WHAT: What type of error was made. WHEN: When the error occurred.

If the parents cannot be reached, call the prescribing physician and report the above.

Over-the-counter drugs (OTC) are very widely utilized and can range from aspirin to calamine lotion to cough medicine. Over-the-counter medications should be treated the same as prescription medications.

1. AVOIDING MEDICATION ERRORS

Medication errors can be avoided if the following guidelines are used:

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- 1. Prepare medication for one child at a time.
- 2. Stay with the child until the medication has been taken.
- 3. Concentrate on the task!
- 4. Do not take a medication from a bottle with a label that you can not read.
- 5. Do not take a medication from another child's container.
- 6. Do not try to hide a medication error.

E. THE EFFECTS OF MAJOR DRUG GROUPS

For each child's protection and safety, it is important for you to notice the effect that the medication has on the child. The time factor between taking a medication and its onset of action can be found by using a Physician's Desk Reference or by asking the pharmacist. Each medication has a different time for onset of action. Always note the onset of action and take the time to notice the effect of the medication.

A medication, when taken, can have three basic effects:

- 1. No effect
- 2. Desired effect
- 3. Undesired effect

Example:

- 1. A person may be taking cough syrup for a cough, yet after 1/2 hour there is no improvement in the cough. This is an example of a medicine having no effect.
- 2. A person may take two aspirins for a headache and within the hour the headache is gone. This is an example of a medicine having <u>a desired</u> effect.
- 3. A person may be taking penicillin for a strep throat. An hour after taking the medication, the client may notice a very itchy rash developing. This is an example of a medicine having an <u>undesired</u> effect.

In order to ascertain what effect as medication is having on a child, you must first be familiar with the desired effect of the medication.

Medicines for children may be divided into five basic groups. Each group of medicines has a different effect on the child.

- 11. Heart medicines (example Digoxin) may be used to slow down or change the heart's function.
- 2. Anticonvulsants (e.g. Phenobarbitol) used for seizure disorders may cause drowsiness.

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- 3. Antibiotics used to fight infection. Allergies are common with this group-
- 4. Fever, pain (e.g. Aspirin, Tylenol) used to fight fever; may cause stomach upsets.
- 5. Mood changing (e.g. Valium, Ritalin) may cause drowsiness or overactivity.

You have a responsibility to know what kind of effect any medication that you are administering has. This implies that you are going to observe each child after his/her medication to check the effect of medication. Did the medication have. . .

- 1. no effect
- 2. the desired effect
- 3. an undesired effect

F. THE ADVERSE EFFECTS OF MEDICATION - WHAT TO DO

Georgie Porgie has a sore throat. He has already missed one day in day care because of this. He is now taking penicillin, I tsp. four times a day. About 15 minutes after his noon dose, you notice him scratching. A rash has developed on his face, neck, and arms. It is getting harder for him to breathe. How would you react?

This is an extreme example of a drug reaction. Many times seemingly harmless drugs have an adverse reaction in sensitive persons.

Always take the time to notice the effect of the drug the child has taken.

How do you respond when you notice a child is having an adverse reaction to a drug?

- 1. STOP the drug.
- 2. CALL and inform the parents of the child's reaction.
- 3. If they are not available, call the prescribing physician.

When the reaction is so severe as to threaten the life of the child, as in the above example, CALL FOR HELP-EMERGENCY HELP IS AVAILABLE BY DIALING 911.

After calling for help, notify the child's parents.

How do you know if what you are seeing is a drug reaction?

<u>KNOW</u> the drug before you give the medication to the child. Drug information can be obtained in various ways, including:

- 1. Package inserts that come with both prescription and non-prescription drugs.
- 2. Calling the pharmacist at your local pharmacy.

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If you are not sure if what you are seeing is an adverse reaction-call for help.

VII. OTHER MATTERS REGARDING MEDICATION

A. THE STORAGE OF MEDICATION

For your safety and the safety of the children in your care, the following measures for storage of medications are suggested:

- 1. Medications and drugs are to be in their original, labeled container. For prescription medications, the label must include the child's name, the date the prescription was issued, and the prescribed dose.
- 2. All medications are to be kept in an area or container which is locked.
- 3. All medications stored in a refrigerator are to be kept in a separate container, preferably a locked one.
- 4. All medications must be stored under proper conditions of sanitation, temperature, light, and moisture.

It is strongly recommended that the key to the locked medicine cabinet be kept either in one specific location or on the person of the individual having the responsibility for the proper storage of medication in the facility at that time.

Medications are always labeled with specific written instructions regarding special storage requirements. Always read the label carefully. Many medications require refrigeration between use.

B. THE DISPOSAL OF MEDICATION

When a prescription is discontinued or if medications are left after a child leaves the center, the medications should be returned to the parents or disposed of in a safe manner (flushing down the toilet is acceptable).

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APPENDIX I

THE MEDICATION LOG

Attached is a sample medication log and a blank log which you may duplicate and use. The log is designed to be used for a specific child for a specific month. After the log is completed it is recommended that it be retained in the child's record.

MEDICATION LOG INSTRUCTIONS

ALLERGIES - list drug allergies

DOCTOR'S NAME & TELEPHONE - for quick reference in case of emergency

PHARMACIST & TELEPHONE - for quick reference for further information

DRUG - name of medication

DOSAGE - amount of medication to be given, i.e., 1 tsp. 3 tablets

ROUTE - route of administration; see the back of Medication Log

REASON - why medication is needed, i.e., ear infection, cough, diaper

rash

DATE START - date medication is to begin

DATE END - date medication is to end

SP. DIR. - special directions, i.e., take before eating, take with milk

TIME - list the time of the day the medication is to be given

- The numbers across the top are the days of the month.

- The parent must sign and date the permission statement <u>after</u> the parent or you fill out the information section on a specific medication.

- After you give each dose, place you initials in the appropriate box according to the time and date.

DATE & COMMENTS

 on the back of log is a space to note reactions to the drug,

time, your response; any medication errors

• NAME OF PERSON - identifies the full name of the person(s) whose initials appear

• ADMINISTERING & in the log. This is especially important in a day care center

• INITIALS where more than one person may be giving medication.

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APPENDIX II

THE MEDICATION LAW REGARDING DAY CARE PROVIDERS

AMENDMENT TO SECTION 1921, TITLE 24 OF THE DELAWARE CODE RELATING TO EXCEPTIONS FROM THE NURSING ACT.

WHEREAS, the present Nursing Act precludes the administration of medication in child day care homes or child day care center, permitting assistance only after completion of a State approved medication training program; and

WHEREAS, public policy calls for a further exception to the Act providing for administration of medication with written parental permission.

NOW, THEREFORE:

BE IT ENACTED BY THE GENERAL ASSEMBLY TO THE STATE OF DELAWARE:

Section 1. Amend Subsection (a) (10), Section 1921, Title 24 of the Delaware Code by striking therefrom the words "Child care homes or child day care centers of'.

Section 2. Amend Section 1921 (a), Title 24 of the Delaware Code by redesignating Subsections (11) and (12) as Subsections (12) and (13) and creating a new Subsection (11) which shall read as follows:

"(11) Administration of prescription or non-prescription medications, other than by injection, by child care providers, who have successfully completed a State approved medication training program, to children in child day care homes or child day care centers regulated by the State under Sections 341-344 Chapter 3, Title 31 of this Code provided the medication and written permission for the administration of the particular medication has been obtained from the child's parent or legal guardian and further provided the medication is in its original container, properly labeled. Properly labeled medication shall include instructions for administration of the medication;"

SYNOPSIS

This Act provides for the administration of prescription medications to children in child care homes of child care centers by child care providers upon written permission from a child's parent or legal guardian.

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